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EXAMINER
MORGAN, ROBERT W

ART UNIT	PAPER NUMBER
3626	

DATE MAILED: 01/16/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)
	09/440,557	LIPSCHER ET AL.
	Examiner	Art Unit
	Robert W. Morgan	3626

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE _3_ MONTH(S) FROM
THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on _31 October 2002_ .

2a)☐ This action is **FINAL**.   2b)☒ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) _1-77_ is/are pending in the application.

    4a) Of the above claim(s) _47-57 and 75_ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☐ Claim(s) _____ is/are rejected.

7)☒ Claim(s) _1-46,58-68,72-74,76 and 77_ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

11)☐ The proposed drawing correction filed on _____ is: a)☐ approved b)☐ disapproved by the Examiner.

    If approved, corrected drawings are required in reply to this Office action.

12)☐ The oath or declaration is objected to by the Examiner.

Priority under 35 U.S.C. §§ 119 and 120

13)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a)☐ All b)☐ Some * c)☐ None of:

    1.☐ Certified copies of the priority documents have been received.

    2.☐ Certified copies of the priority documents have been received in Application No. _____ .

    3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

14)☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application).

    a) ☐ The translation of the foreign language provisional application has been received.

15)☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO-1449) Paper No(s) _4_ .

4) ☐ Interview Summary (PTO-413) Paper No(s). _____ .
5) ☐ Notice of Informal Patent Application (PTO-152)
6) ☐ Other: .

DETAILED ACTION

Election/Restrictions

1.   This communication is in response to the restriction filed 10/31/02 in paper number 10,

the following has occurred: Applicant makes an election on Group I which includes claims 1-46,

58-68, 72-74 and 76-77.

Claim Rejections - 35 USC § 103

2.   The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in
> section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are
> such that the subject matter as a whole would have been obvious at the time the invention was made to a person
> having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the
> manner in which the invention was made.

3.   Claims 1-5, 7-10, 14-23, 26, 29, 58-59, 61-63, 65, 72 and 76-77 are rejected under 35

U.S.C. 103(a) as being unpatentable over U.S. Patent No. 6,385,592 to Angles et al. in view U.S.

Patent No. 6,018,713 to Coli et al.

As per claim 1, Angles et al. teaches a system and method for delivering customized

advertisements to users of interactive device including computers connected to on-line services,

interactive kiosks (reads on "a plurality of devices for enabling entry" and "display to the user"),

interactive television system and the like (see: column 2, lines 49-62 and abstract). The system

includes a consumer computer (10, Fig. 1) (reads on "a product information selecting

computer"), a content provider computer (14, Fig. 1) and advertisement provider computer (18,

Fig. 1), which communicate with each other by use of a communication medium (20, Fig. 1)

(reads on "a communications network for transmitting information") (see: column 7, lines 60-

64). In addition, Angles et al. further teaches that a consumer directs the consumer computer (12,

Fig. 1) to communicate with content provider computer (14, Fig. 1) via the communication

medium (20, Fig. 1) and based the consumer's profile, the advertisement provider computer (18,

Fig. 1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28). Additionally, Angles et al.

teaches that the advertisement provider computer (18, Fig. 4) utilizes a variety of modules to

store customer information and to generate customized advertisements (30, Fig. 1). The modules

include a registration module (60 Fig. 4), an advertising module (62, Fig. 4), a registration

database (68, Fig. 4), an advertisement database (70, Fig. 4) and an accounting database (72, Fig.

4) (reads on "database for storing information connected to consumer's computer") (see: column

13, lines 34-47 and column 15, lines 32-43).

Angles et al. fails to teach the targeting of healthcare related information and healthcare

product information to a computer user.

Coli et al. teaches a network-based system and method for ordering and cumulative

results reporting of medical test at a hospital or physician office that includes advertising for a

particular drug treatment or medical device that may be needed by the patient as part of the test

results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a

client computer is programmed to display advertising and product information after receiving a

request the user's computer (see: column 7, lines 25-47).

Therefore, it would have been obvious to a person of ordinary skill in the art the time the

invention was made to include the advertisement of drug treatment and medical devices as taught

by Coli et al. within the delivery of customized advertisements as taught by Angles et al. with the

motivation of trying to successfully promoting a product or service to a targeted audience

according a user profile.

As per claim 2, Angles et al. teaches a system and method for delivering customized

advertisements to users of interactive device including computers connected to on-line services,

interactive kiosks (reads on "a plurality of devices for enabling entry" and "display to the user"),

interactive television system and the like (see: column 2, lines 49-62 and abstract). The system

includes a consumer computer (10, Fig. 1), a content provider computer (14, Fig. 1) and

advertisement provider computer (18, Fig. 1) (reads on "a advertising selecting computer"),

which communicate with each other by use of a communication medium (20, Fig. 1) (reads on "a

communications network for transmitting information") (see: column 7, lines 60-64). In addition,

Angles et al. further teaches that a consumer directs the consumer computer (12, Fig. 1) to

communicate with content provider computer (14, Fig. 1) via the communication medium (20,

Fig. 1) and based the consumer's profile, the advertisement provider computer (18, Fig. 1)

selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (reads on "advertising selecting computer compares related information to

the advertising information and selects advertising information for display to the user") (see:

column 7, lines 65 to column 8, lines 28). Additionally, Angles et al. teaches that the

advertisement provider computer (18, Fig. 4) utilizes a variety of modules to store customer

information and to generate customized advertisements (30, Fig. 1). The modules include a

registration module (60 Fig. 4), an advertising module (62, Fig. 4), a registration database (68,

Fig. 4), an advertisement database (70, Fig. 4) and an accounting database (72, Fig. 4) (reads on

"database for storing information connected to consumer's computer") (see: column 13, lines 34-47 and column 15, lines 32-43).

Angles et al. fails to teach the targeting of healthcare related information and healthcare product information to a computer user.

Coli et al. teaches a network-based system and method for ordering and cumulative results reporting of medical test at a hospital or physician office that includes advertising for a particular drug treatment or medical device that may be needed by the patient as part of the test results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a client computer is programmed to display advertising and product information after receiving a request the user's computer (see: column 7, lines 25-47).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed in the rejection of claim 1, and incorporated herein.

As per claim 3, Angles et al. and Coli et al. fails to explicitly teaches healthcare related information comprises information received from a healthcare group consisting of healthcare providers, patients, healthcare service organizations, pharmaceutical companies, healthcare product and service vendors, pharmacies, medical facilities, healthcare information services, medical record databases, government agencies, non-profit organizations, health research organizations and billing companies.

However, Angles et al. and Coli et al. teach a network-based system and method for ordering and cumulative results reporting of medical test at a hospital or physician office computers (202, 204, 206, 208, Fig. 2) that includes advertising for a particular drug treatment or medical device that may be needed by the patient as part of the test results reporting output (see:

Coli et al.: column 4, lines 25-35, column 9, lines 4-22 and abstract). The Examiner considers

modifying the hospital and physician office to include the above mentioned healthcare group an

obvious modification to system of Angles et al. and Coli et al.

One of ordinary skill in the art at the time the invention was made would have found it

obvious to include a healthcare group consisting of healthcare providers, patients, healthcare

service organizations, pharmaceutical companies, healthcare product and service vendors,

pharmacies, medical facilities, healthcare information services, medical record databases,

government agencies, non-profit organizations, health research organizations and billing

companies within the system as taught by Angles et al. and Coli et al. with the motivation of

receiving information from a number of people in the medical community to better target

advertisement more suited to their profession.

As per claim 4, Angles et al. teaches database of stored non-healthcare related

information connected to the advertising selecting computer wherein the selecting computer

compares the healthcare related information and the non-healthcare information to the

advertising information and selects advertising information for display to the user that is related

to the non-healthcare information. This feature is met by the consumer computer (12, Fig. 1) that

communicates with the content provider computer (14, Fig. 1) via the communication medium

(20, Fig. 1) and based on the consumer's profile, the advertisement provider computer (18, Fig.

1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (reads on "advertising selecting computer compares related information to

the advertising information and selects advertising information for display to the user") (see:

column 7, lines 65 to column 8, lines 28). Angles et al. further teaches that the advertisement

provider computer (18, Fig. 4) utilizes a variety of modules to store customer information and to

generate customized advertisements (30, Fig. 1). The modules include a registration module (60

Fig. 4), an advertising module (62, Fig. 4), a registration database (68, Fig. 4), an advertisement

database (70, Fig. 4) and an accounting database (72, Fig. 4) (reads on "database for storing

information connected to consumer's computer") (see: column 13, lines 34-47 and column 15,

lines 32-43).

As per claim 5, Angles et al. teaches that at least one of the pluralities of devices is a

wireless portable computer device (see: column 10, lines 43-48).

As per claim 7, Angles et al. teaches a system that includes a consumer computer (10,

Fig. 1), a content provider computer (14, Fig. 1) and advertisement provider computer (18, Fig.

1), which communicate with each other by use of a communication medium (20, Fig. 1) (see:

column 7, lines 60-64).

Angles et al. fails to the advertising selecting computer constructs a medical record for a

patient using healthcare information selected from at least one of the healthcare group and

transmits the medical record via the communications network to a computer user.

Coli et al. teaches an advertising process that begins when recent test result values are

compared to information in a database, using an expert system based on patient demographics,

medical history, and the available test results, whether any of the values are abnormal or whether

the patient record indicates a potential need for particular medical items. If the patient records

indicates a need for particular medical item or drug an advertisement for a drug or other medical

device is selected and transmitted to the physician or hospital computers (see: column 16, lines

40-55).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed in the rejection of claim 1, and incorporated herein.

As per claims 8-10, Angles et al. teaches a system includes a consumer computer (10, Fig. 1), a content provider computer (14, Fig. 1) and advertisement provider computer (18, Fig. 1), which communicate with each other by use of a communication medium (20, Fig. 1) (see: column 7, lines 60-64). In addition, Angles et al. further teaches that a consumer directs the consumer computer (12, Fig. 1) to communicate with content provider computer (14, Fig. 1) via the communication medium (20, Fig. 1) and based the consumer's profile, the advertisement provider computer (18, Fig. 1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28). The system of claim 2 further comprising the advertising selecting computer transmits a pharmaceutical advertisement to at least one of the plurality of devices for display via the communications network and in response to a healthcare provider user selecting the displayed pharmaceutical advertisement, a prescription for a patient is initiated.

Angles et al. fails to explicitly teach transmitting pharmaceutical advertisement in response to a healthcare provider user selecting the displayed pharmaceutical advertisement, a prescription for a patient is initiated and automatically created as well as initializing parameters of the prescription to values based on patient medical information.

Coli et al. teaches an advertising process that begins when recent test result values are compared to information in a database, using an expert system based on patient demographics, medical history, and the available test results, whether any of the values are abnormal or whether the patient record indicates a potential need for particular medical items. If the patient records

indicates a need for particular medical item or drug an advertisement for a drug or other medical

device is selected and transmitted to the physician or hospital computers (see: column 16, lines

40-55).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed

in the rejection of claim 1, and incorporated herein.

As per claim 14, Angles et al. teaches a consumer computer (12, Fig. 1) that

communicates with the content provider computer (14, Fig. 1) via the communication medium

(20, Fig. 1) and based on the consumer's profile, the advertisement provider computer (18, Fig.

1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28). Angles et al. further

teaches that the advertisement provider computer (18, Fig. 4) utilizes a variety of modules to

store customer information and to generate customized advertisements (30, Fig. 1). The modules

include a registration module (60 Fig. 4), an advertising module (62, Fig. 4), a registration

database (68, Fig. 4), an advertisement database (70, Fig. 4) (reads on "product information

database") and an accounting database (72, Fig. 4) (see: column 13, lines 34-47 and column 15,

lines 32-43).

Angles et al. fails to teach displaying targeted healthcare product information to a

computer user relating to the medical information comprising a medical information database

including patient medical information.

Coli et al. teaches a server computer programmed to store patient test data records in a

database such as patient ID, test ID, date, observed values, and additional notes (see: column 7,

lines 49-57. In addition, Coli et al. teaches a patient database (214, Fig. 2) that selectively

generates longitudinal medical reports (216, Fig. 2), and performs test ordering functions (218,

Fig. 2), real time results reporting (220, Fig. 2), and intelligent physician alerting and decision

support functions (222, Fig. 2) as appropriate in response to requests from computers (202, 204,

206, 208, Fig. 2) (see: column 9, lines 35-40).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed

in the rejection of claim 1, and incorporated herein.

As per claim 15, Coli et al. teaches a client computer that is programmed to display

advertising and product information after receiving a request the user's computer (see: column 7,

lines 25-47). The Examiner considers the computer users to be group consisting of a patient and

a healthcare provider.

As per claims 16-18, Coli et al. teaches a network-based system and method for ordering

and cumulative results reporting of medical test at a hospital or physician office that includes

advertising for a particular drug treatment or medical device that may be needed by the patient as

part of the test results reporting output (see: column 4, lines 25-35 and abstract).

As per claims 19-23, Coli et al. teaches a server computer programmed to store patient

test data records in a database such as patient ID, test ID, date, observed values, and additional

notes (see: column 7, lines 49-57. In addition, Coli et al. teaches a patient database (214, Fig. 2)

that selectively generates longitudinal medical reports (216, Fig. 2), and performs test ordering

functions (218, Fig. 2), real time results reporting (220, Fig. 2), and intelligent physician alerting

and decision support functions (222, Fig. 2) as appropriate in response to requests from

computers (202, 204, 206, 208, Fig. 2) (see: column 9, lines 35-40). Additionally, Coli et al.

teaches a network-based system and method for ordering and cumulative results reporting of

medical test at a hospital or physician office that includes advertising for a particular drug

treatment or medical device that may be needed by the patient as part of the test results reporting

output (see: column 4, lines 25-35 and abstract). Furthermore, a client computer is programmed

to display advertising and product information after receiving a request the user's computer (see:

column 7, lines 25-47). The Examiner considers the data received and the information requested

by the user's computer regarding the display of an advertisement and product information to the

users to also include a group consisting of health care provider information, patient medical

records, patient prescription records, patient entered information, medical test ordering and test

result records, and health information.

As per claims 26 and 29, they are rejected for the same reasons set forth in claim 19.

As per claim 58, Angles et al. teaches a system and method for delivering customized

advertisements to users of interactive device including computers connected to on-line services,

interactive kiosks, interactive television system and the like (see: column 2, lines 49-62 and

abstract). The system includes a consumer computer (10, Fig. 1), a content provider computer

(14, Fig. 1) and advertisement provider computer (18, Fig. 1), which communicate with each

other by use of a communication medium (20, Fig. 1) (see: column 7, lines 60-64). In addition,

Angles et al. further teaches that a consumer directs the consumer computer (12, Fig. 1) to

communicate with content provider computer (14, Fig. 1) via the communication medium (20,

Fig. 1) and based the consumer's profile, the advertisement provider computer (18, Fig. 1)

selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28).

Angles et al. fails to teach targeting healthcare product information and transmitting the

display to a patient.

Coli et al. teaches a network-based system and method for ordering and cumulative

results reporting of medical test at a hospital or physician office that includes advertising for a

particular drug treatment or medical device that may be needed by the patient as part of the test

results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a

client computer is programmed to display advertising and product information after receiving a

request the user's computer (see: column 7, lines 25-47).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed

in the rejection of claim 1, and incorporated herein.

As per clam 59, Angles et al. and Coli et al. teaches a network-based system and method

for ordering and cumulative results reporting of medical test at a hospital or physician office that

includes advertising for a particular drug treatment or medical device that may be needed by the

patient as part of the test results reporting output (see: Coli et al.: column 4, lines 25-35 and

abstract). In addition, Angles et al. and Coli et al. teaches a client computer is programmed to

display advertising and product information after receiving a request the user's computer (see:

Coli et al.: column 7, lines 25-47). Angles et al. and Coli et al. further teaches that a consumer

directs the consumer computer (12, Fig. 1) to communicate with content provider computer (14,

Fig. 1) via the communication medium (20, Fig. 1) and based the consumer's profile, the

advertisement provider computer (18, Fig. 1) selects an appropriate customized advertisement

(30, Fig. 1) then sends it to the consumer computer (12, Fig. 1) (see: Angles et al.: column 7,

lines 65 to column 8, lines 28). The Examiner considers the consumer's profile to be based on

user-entered data that could be patient-entered.

As per claim 61, Angles et al. teaches that a consumer directs the consumer computer

(12, Fig. 1) to communicate with content provider computer (14, Fig. 1) via the communication

medium (20, Fig. 1) and based the consumer's profile, the advertisement provider computer (18,

Fig. 1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (see: Angles et al.: column 7, lines 65 to column 8, lines 28). The

Examiner considers the consumer's profile to be based on user-entered data that could be patient-

entered.

Angles et al. fails to teach customizing information on the display based on the patient

medical information, the healthcare provider information and the patient-entered data.

Coli et al. teaches a network-based system and method for ordering and cumulative

results reporting of medical test at a hospital or physician office that includes advertising for a

particular drug treatment or medical device that may be needed by the patient as part of the test

results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a

client computer is programmed to display advertising and product information after receiving a

request the user's computer (see: column 7, lines 25-47).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed

in the rejection of claim 1, and incorporated herein.

As per claim 62, Angles et al. teaches a system and method for delivering customized

advertisements to users of interactive device including computers connected to on-line services,

interactive kiosks, interactive television system and the like (see: column 2, lines 49-62 and

abstract). The system includes a consumer computer (10, Fig. 1), a content provider computer

(14, Fig. 1) and advertisement provider computer (18, Fig. 1), which communicate with each

other by use of a communication medium (20, Fig. 1) (see: column 7, lines 60-64). In addition,

Angles et al. further teaches that a consumer directs the consumer computer (12, Fig. 1) to

communicate with content provider computer (14, Fig. 1) via the communication medium (20,

Fig. 1) and based the consumer's profile, the advertisement provider computer (18, Fig. 1)

selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer

computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28). Additionally, Angles et al.

teaches that the advertisement provider computer (18, Fig. 4) utilizes a variety of modules to

store customer information and to generate customized advertisements (30, Fig. 1). The modules

include a registration module (60 Fig. 4), an advertising module (62, Fig. 4), a registration

database (68, Fig. 4), an advertisement database (70, Fig. 4) and an accounting database (72, Fig.

4) (see: column 13, lines 34-47 and column 15, lines 32-43).

Angles et al. fails to explicitly teach access through a global communication network and

displaying targeted healthcare product information including creating patient medical records.

Coli et al. teaches a network-based system and method for ordering and cumulative

results reporting of medical test at a hospital or physician office that includes advertising for a

particular drug treatment or medical device that may be needed by the patient as part of the test

results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a

client computer is programmed to display advertising and product information after receiving a

request the user's computer (see: column 7, lines 25-47). Furthermore Coli et al. teaches at block

1710, that the computer using a communications network, such as the internet or a private

network is used to create a complete cumulative results reporting record for that patient (see:

column 18, lines 3-8).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed

in the rejection of claim 1, and incorporated herein.

As per claim 63, it is rejected for the same reasons set forth in claim 19.

As per claim 65, it is rejected for the same reasons set forth in claim 19.

As per claims 72 and 76-77, Angles et al. and Coli et al. all use a computer system with

software to run all the programs performed on the system (see: Angles et al.: column 3, lines 21-

30 and Coli et al. column 9, lines 4-17).

4.   Claims 6, 11-13, 45-46 and 66-68 are rejected under 35 U.S.C. 103(a) as being

unpatentable over U.S. Patent No. 6,385,592 to Angles et al. in view of Official Notice.

As per claim 6, Angles fails to explicitly teach the devices are selected from the group

consisting of web TV devices, personal digital assistant devices, personal computers, handheld

portable computers, portable computers, wireless telephone devices and wireless personal access

devices.

However, Angles et al. teaches that the consumer computer (12, Fig. 1) could be a

computer workstation, a local area network of computer, an interactive television, an interactive

kisok, a personal digital assistant, an interactive wireless communications device or the like (see:

column 10, lines 43-48). It is well known in the computer industry to use the above-mentioned

devices to communicate with a network. Therefore, it would have been obvious to a person of

ordinary skill in the art the time the invention was made to include the above-mentioned devices

within the delivery of customized advertisements as taught by Angles et al. with the motivation

of providing appropriate means for user to communicates via a network.

As per claims 11-12, Angles et al. teaches the use of an advertising module (62, Fig. 4)

that determines the appropriate amount to debited or credited to accounts of the content provider,

customer and advertiser for viewing an advertisement and then stores the advertising audit

information in the accounting database (72, Fig. 72) (see: column 21, lines 9-36 and Fig. 8).

Although Angles et al. fails to explicitly teach calculating a revenue amount to be paid to

the healthcare provider for using the computer system and referring patients to a health

information website. It is well known in the medical industry that a fee is paid by the users

("healthcare provider") to the advertiser for directing individuals ("patient") to particular website

with the useful information of a product or service. Therefore, it would have been obvious to a

person of ordinary skill in the art the time the invention was made to calculate a revenue amount

for referring patient to website within the delivery of customized advertisements as taught by

Angles et al. with the motivation of providing relevant and significant information to an

individual informing him of the new or improved product or service.

As per claim 13, Angles et al. teaches a wide range of interactive communication

mediums such as interactive television networks, telephone networks, wireless data transmission

systems, two-way cable systems, customized computer networks, interactive kiosk networks,

automatic teller machine networks, and the like (see: column 9, lines 37-43).

Although Angles et al. fails to teach a communications network selected from the group

consisting of a global communications network, a communications inter-network, a wide area

network, a local area network, a wireless telephone network, a satellite network, an interactive

television network and a cable network.

It is well known in the computer industry that the above-mentioned networks are used to

connect a group of computers using a communication medium such a modem. Therefore, it

would have been obvious to a person of ordinary skill in the art the time the invention was made

to include a group consisting of the above mentioned networks within the delivery of customized

advertisements as taught by Angles et al. with the motivation allowing a high volume of

computers to transmit and receive information via a high speed network.

As per claims 45-46, Angles et al. teaches the use of an advertising module (62, Fig. 4) that

determines the appropriate amount to debited or credited to accounts of the content provider,

customer and advertiser for viewing an advertisement and then stores the advertising audit

information in the accounting database (72, Fig. 72) (see: column 21, lines 9-36 and Fig. 8).

Although Angles et al. fails to explicitly teach prioritizing pharmaceutical advertisement

display order according to an amount of revenue received for displaying each pharmaceutical

advertisement. It is well known in the medical industry that a fee is paid by the users to the

advertiser for directing the user to a website including pharmaceutical information of that

company's particular product or service. Therefore, it would have been obvious to a person of

ordinary skill in the art the time the invention was made to calculate a revenue amount for

referring patient to website within the delivery of customized advertisements as taught by Angles

et al. with the motivation of providing relevant and significant information to an individual

informing him of the new or improved product or service.

As per claims 66-68, they are rejected for the same reasons set forth in claims 11-12.

5.   Claims 24-25, 27-28, 60 and 73 are rejected under 35 U.S.C. 103(a) as being

unpatentable over U.S. Patent No. 6,385,592 to Angles et al. and U.S. Patent No. 6,018,713 to

Coli et al. in view of Official Notice.

As per claim 24, Angles et al. and Coli et al. teaches a patient medical record comprises

information selected from the group consisting of a patient's medical condition, allergies,

medications, physical examination results, test orders and results, health insurance enrollment

and selected pharmacy (see: Coli et al. Fig. 11).

Although Angles et al. and Coli et al. fail to teach all of the above-mentioned patient

medical record, it is well known in the medical field to include a patient medical record

comprises a group consisting of a patient's medical condition, allergies, medications, physical

examination results, test orders and results, health insurance enrollment and selected pharmacy

within patient's medical record. Therefore, it would have been obvious to a person of ordinary

skill in the art the time the invention was made to include a group consisting of the above

mentioned patient medical record within the system taught by Angles et al. and Coli et al. with

the motivation of receiving accurate patient information to better inform the patient about

advertisements regarding a particular product or service.

As per claim 25, Coli et al. teaches a network-based system and method for ordering and

cumulative results reporting of medical test at a hospital or physician office (reads on "using

patient medical information and healthcare provider information collected from at least one of a

plurality of sources") that includes advertising for a particular drug treatment or medical device

that may be needed by the patient as part of the test results reporting output (see: column 4, lines

25-35 and abstract). In addition, Coli et al. teaches a client computer is programmed to display

advertising and product information after receiving a request the user's computer (see: column 7, lines 25-47).

As per claim 27, Coli et al. teaches the claimed product advertisements comprise pharmaceutical advertisements. This feature is met by the network-based system and method for ordering and cumulative results reporting of medical test at a hospital or physician office that includes advertising for a particular drug treatment (pharmaceutical advertisement) or medical device that may be needed by the patient as part of the test results reporting output (see: column 4, lines 25-35 and abstract).

As per claim 28, Angles et al. teaches the claimed at least one of the plurality of sources comprises collected user entered data and user actions as a user navigates through an electronic web page display (see: column 7, lines 65 to column 8, lines 5).

As per claim 60, Angles et al. and Coli et al. teaches a network-based system and method for ordering and cumulative results reporting of medical test at a hospital or physician office that includes advertising for a particular drug treatment or medical device that may be needed by the patient as part of the test results reporting output (see: Coli et al.: column 4, lines 25-35 and abstract). In addition, Angles et al. and Coli et al. teaches a client computer is programmed to display advertising and product information after receiving a request the user's computer (see: Coli et al.: column 7, lines 25-47). Angles et al. and Coli et al. teach a wide range of interactive communication mediums such as interactive television networks, telephone networks, wireless data transmission systems, two-way cable systems, customized computer networks, interactive kiosk networks, automatic teller machine networks, and the like (see: Angles et al.: column 9, lines 37-43).

Although Angles et al. and Coli et al. fail to teach a communications network selected

from the group consisting of a global communications network, a communications inter-network,

a wide area network, a local area network, a wireless telephone network, a satellite network, an

interactive television network and a cable network.

It is well known in the computer industry that product information is transmitted and

display to a user via a global communications network. Therefore, it would have been obvious to

a person of ordinary skill in the art the time the invention was made to include a global

communication network to display product information with the system as taught by Angles et

al. and Coli et al. with the motivation allowing a high volume of computers to transmit and

receive information via a high speed network.

As per claim 73, Angles et al. and Coli et al. all use a computer system with software to

run all the programs performed on the system (see: Angles et al.: column 3, lines 21-30 and Coli

et al. column 9, lines 4-17).

6.   Claims 30-44, 64 and 74 are rejected under 35 U.S.C. 103(a) as being unpatentable over

U.S. Patent No. 6,385,592 to Angles et al. and U.S. Patent No. 6,018,713 to Coli et al in view of

U.S. Patent No. 5,845,255 to Mayaud.

As per claims 30-32, Angles et al. and Coli et al. teaches a network-based system and

method for ordering and cumulative results reporting of medical test at a hospital or physician

office that includes advertising for a particular drug treatment or medical device that may be

needed by the patient as part of the test results reporting output (see: Coli et al.: column 4, lines

25-35 and abstract). In addition, Coli et al. teaches a client computer is programmed to display

advertising and product information after receiving a request the user's computer (see: Coli et al.: column 7, lines 25-47).

Angles et al. and Coli et al. fail to teach initiating an electronic prescription for the drug for a patient.

Mayaud teaches an electronic prescription creation system for physician which can be transmitted across a network for fulfillment by a specified pharmacy according to the patient drug benefit plan (see: column 27, lines 30-50).

One of ordinary skill in the art at the time the invention was made would have found it obvious to include the prescription management system as taught by Mayaud with the system of Angles et al. and Coli et al. with the motivation of reducing prescription cost to the patients and to their drug benefit management company or government agency (see: Mayaud: column 4, lines 25-29).

As per claim 33, Mayaud teaches the claimed initializing parameters of the prescription to values based on the patient medical information (see: column 20, lines 50-67).

As per claim 34, Mayaud teaches the claimed electronic prescription is electronically sent to a patient-selected pharmacy. This limitation is met by the electronic prescription creation system for physician, which can be transmitted across a network for fulfillment by a specified pharmacy according to the patient drug benefit plan (see: column 27, lines 30-50).

As per claim 35, Mayaud teaches that if the prescription contains at least one refill, at least one prescription refill is not sent to the patient-selected pharmacy and is electronically stored for the patient. This feature is met by the electronic prescription system using the Refill field (100, Fig. 3) that shows the number of refills permitted as well as back calculating refills

(see: column 26, lines 31-60). The Examiner considers the refill field that stores the number of

refills capable of not sending a prescription to the pharmacy if there is only one refill left.

As per claim 36, Mayaud teaches the claimed electronically stored prescription refill is

sent to the patient-selected pharmacy upon request of the patient (see: column 27, lines 30-50).

As per claims 37-43, Angles et al. and Coli et al. teaches a network-based system and

method for ordering and cumulative results reporting of medical test at a hospital or physician

office that includes advertising for a particular drug treatment or medical device that may be

needed by the patient as part of the test results reporting output (see: Coli et al.: column 4, lines

25-35 and abstract). In addition, Coli et al. teaches a client computer is programmed to display

advertising and product information after receiving a request the user's computer (see: Coli et

al.: column 7, lines 25-47).

Angles et al. and Coli et al. fail to teach filtering of patient medical information including

displaying or not displaying drugs the patient is allergic to.

Mayaud teaches a Problem button (50, Fig. 3) that brings up a patient problem history

information screen as shown in Fig. 12 which includes patient's drug related allergies, or drug

reactions (filtering) and is activated by the Allergies button (52, Fig. 3) (see: column 20, lines

20-40).

The obviousness for combining the teachings of Mayaud in the system of Angles et al.

and Coli et al. are discussed in the rejection of claim 30, and incorporated herein.

As per claim 44, Angles et al. and Coli et al. teaches a network-based system and method

for ordering and cumulative results reporting of medical test at a hospital or physician office that

includes advertising for a particular drug treatment or medical device that may be needed by the

patient as part of the test results reporting output (see: Coli et al.: column 4, lines 25-35 and

abstract). In addition, Coli et al. teaches a client computer is programmed to display advertising

and product information after receiving a request the user's computer (see: Coli et al.: column 7,

lines 25-47).

Angles et al. and Coli et al. fails to teach filtering pharmaceutical advertisements for

drugs that are not included in the formulary of the patient's insurance company.

Mayaud teaches that the patient record including the patient's histories can show not only

the drugs prescribed, but also the conditions for which they were prescribed, allergies,

demographics, insurance coverage, treating health care providers, and so on (see: column 21,

lines 33-37). In addition, Mayaud teaches a Problem button (50, Fig. 3) that brings up a patient

problem history information screen as shown in Fig. 12 which includes patient's drug related

allergies, or drug reactions (filtering) and is activated by the Allergies button (52, Fig. 3) (see:

column 20, lines 20-40).

The obviousness for combining the teachings of Mayaud in the system of Angles et al.

and Coli et al. are discussed in the rejection of claim 30, and incorporated herein.

As per claim 64, Angles et al. teaches a system and method for delivering customized

advertisements to users of interactive device including computers connected to on-line services,

interactive kiosks, interactive television system and the like (see: column 2, lines 49-62 and

abstract). The system includes a consumer computer (10, Fig. 1), a content provider computer

(14, Fig. 1) and advertisement provider computer (18, Fig. 1), which communicate with each

other by use of a communication medium (20, Fig. 1) (see: column 7, lines 60-64). In addition,

Angles et al. further teaches that a consumer directs the consumer computer (12, Fig. 1) to

communicate with content provider computer (14, Fig. 1) via the communication medium (20, Fig. 1) and based the consumer's profile, the advertisement provider computer (18, Fig. 1) selects an appropriate customized advertisement (30, Fig. 1) then sends it to the consumer computer (12, Fig. 1) (see: column 7, lines 65 to column 8, lines 28). Additionally, Angles et al. teaches that the advertisement provider computer (18, Fig. 4) utilizes a variety of modules to store customer information and to generate customized advertisements (30, Fig. 1). The modules include a registration module (60 Fig. 4), an advertising module (62, Fig. 4), a registration database (68, Fig. 4), an advertisement database (70, Fig. 4) and an accounting database (72, Fig. 4) (see: column 13, lines 34-47 and column 15, lines 32-43).

Angles et al. fails to explicitly teach displaying targeted healthcare product information, prescription writing habits of a healthcare provider, selecting an advertisement for display to a user that is related to the at least one of the plurality of sources and transmitting the healthcare advertisement for electronically displaying to the user.

Coli et al. teaches a network-based system and method for ordering and cumulative results reporting of medical test at a hospital or physician office that includes advertising for a particular drug treatment or medical device that may be needed by the patient as part of the test results reporting output (see: column 4, lines 25-35 and abstract). In addition, Coli et al. teaches a client computer is programmed to display advertising and product information after receiving a request the user's computer (see: column 7, lines 25-47). Furthermore Coli et al. teaches at block 1710, that the computer using a communications network, such as the internet or a private network is used to create a complete cumulative results reporting record for that patient (see: column 18, lines 3-8).

The obviousness for combining the teachings of Coli et al. and Angles et al. are discussed in the rejection of claim 1, and incorporated herein.

Angles et al. and Coli et al. fail to teach the prescription writing habits of a healthcare provider.

Mayaud teaches a manually maintainable problem record maintenance screen for physician to maintain their own personal customized prescription, diagnosis, allergy or other useful lists to supplement the automatically maintained system lists (see: column 44, lines 19-48 and Fig. 14).

The obviousness for combining the teachings of Mayaud in the system of Angles et al. and Coli et al. are discussed in the rejection of claim 30, and incorporated herein.

As per claim 74, Angles et al., Coli et al. and Mayaud all use a computer system with software to run all the programs performed on the system (see: Angles et al.: column 3, lines 21-30, Coli et al. column 9, lines 4-17, and Mayaud column 7, lines 13-20).

Conclusion

7.   The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

In related art (6,317,789) Rakavy et al. teaches a method and apparatus for selecting advertisements and other information from a computer network database.

In related art (6,298,348) Eldering discloses a consumer profiling system in which consumer profiles can be access by advertisers who transmit information characterizing their ads.

In related art (6,073,375) Fant provides a display advertising system placed on one side of a two-panel elevator access door.
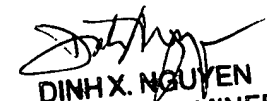
Any inquiry concerning this communication or earlier communications from the examiner should be directed to Robert W. Morgan whose telephone number is (703) 605-4441. The examiner can normally be reached on 8:30 a.m. - 5:00 p.m. Mon - Fri.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (703) 305-9588. The fax phone numbers for the organization where this application or proceeding is assigned are (703) 305-7687 for regular communications and (703) 305-7687 for After Final communications.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is (703) 308-1113.

RwM
rwm
January 13, 2003

DINH X. NGUYEN
PRIMARY EXAMINER